Opening Statement of the Honorable Joseph R. Pitts Subcommittee on Health Hearing on "Protecting Infants: Ending Taxpayer Funding for Abortion Providers Who Violate the Law" September 17, 2015

(As Prepared for Delivery)

Earlier this summer, on July 15, 2015 many Americans learned for the first time about some of the tortuous and gruesome practices in abortion clinics related to the destruction of unborn babies. In recent weeks, our nation – and our nation's capital – has re-engaged in an examination about the purveyors of abortion and their grisly practices. =

Abortion supporters cloak their support for abortion under the guise of "woman's right to choose." Yet they conveniently ignore the choices of thousands of unborn baby girls. How ironic that "pro-choice" advocates oppose letting unborn babies choose life.

Yet, today, advances in medical practice and science confirm what we have long known from morality and common-sense. Modern medicine treats the unborn child as a patient. Medical pioneers have made great breakthroughs in treating the unborn—for genetic problems, vitamin deficiencies, irregular heart rhythms, and other medical conditions.

Science has shown us earlier and earlier glimpses of tiny unborn human beings who can feel pain. What must such a baby feel when she is approached by doctors who come to kill rather than to cure? Anyone who sees the arms and legs of a tiny baby can hardly doubt whether it is a human being. The real question for all of us is whether that tiny human life has a God-given right to be protected by the law— the same right we have.

Abortion is not just about an unborn child, it is about each of us. We cannot diminish the value of one category of human life— whether born or unborn—without diminishing the value of all human life. When we talk about abortion, we are talking about two lives—the life of the mother and the life of the unborn child.

Medicaid, along with CHIP pays for roughly half of all births in the United States each year. At the same time, Medicaid accounts for more than 15 percent of all health care spending in the United States and plays an increasingly large role in our nation's health care system. Medicaid spending accounts for roughly one in every four dollars in an average State budget.

Today, no federal funds can be used to perform elective abortions. And yet, many in the abortion industry still seek ways to use government, taxpayer-funded resources to support their business. Some providers of elective abortions bill Medicaid and CHIP for other non-abortion related health care services. I support efforts to amend the law and give states the discretion to exclude abortion providers from receiving taxpayer funding through Medicaid.

States currently have broad authority to exclude from Medicaid and CHIP providers who violate program requirements—including reasons outlined in detail in federal statute and in state laws. Courts have also upheld the ability of a state to exclude providers suspected of fraud or who are under investigation. One of our witnesses will discuss this in more detail.

Given the factual record, some states have already taken steps to block state taxpayer funding for providers, including Planned Parenthood, in light of some unconscionable atrocities –both apparent and documented from state judicial and enforcement actions. No State should be

forced to continue to include providers in their Medicaid program who commit reprehensible acts. And taxpayers should not be forced to pay for it.

The Committee wants to ensure States have appropriate flexibility of excluding from their Medicaid programs providers who are suspected of serious violations of federal law.

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